

## ILLEGAL DRUG USE

(372B)

**PARTICIPANT TYPE.....PREGNANT, BREASTFEEDING, NOT BREASTFEEDING WOMEN  
HIGH RISK.....No**

### **RISK DESCRIPTION:**

Any illegal drug use

Note: Illegal drugs may include but are limited to cocaine, crack, marijuana, amphetamines, sedatives, hypnotics, tranquilizers, hallucinogens, narcotics and inhalants.

### **ASK ABOUT:**

- Her understanding of the potential dangers to herself and her infant
- Attitude about drug treatment
- Awareness of available help and readiness to access help
- Access to and receipt of prenatal care and postpartum health care
- Concurrent use of other substances including tobacco and alcohol
- Prenatal weight gain pattern and weight goal
- Typical dietary intake
- Dietary supplements, particularly those appropriate for her categorical status (e.g., iron for pregnant women)
- Support system
- Emotional and psychological attitude towards pregnancy and/or parenting
- Whether she has discussed her drug use with her primary care provider

### **NUTRITION COUNSELING/EDUCATION TOPICS:**

- Pregnant Women:
  - Provide education about the dangers of illegal drugs during pregnancy such as increased risk for still birth, miscarriage, low birth weight babies and fetal abnormalities.
  - Encourage regular health care. Pregnant addicts often forget their own health care adding to their unborn infant's risk.
  - Identify any nutritional deficiencies and provide counseling about how to improve food intake of those nutrients.
  - The safest recommendation is to avoid all illegal drugs.

Revised July 2016

Developed October 2009 by the Iowa WIC Program

## **NUTRITION COUNSELING/EDUCATION TOPICS (CON'T):**

- Breastfeeding Women:
  - Describe how illegal drugs pass through breastmilk and can seriously harm her baby.
  - Provide education about the dangers of illegal drugs during breastfeeding.
  - Breastfeeding is contraindicated for women who use illegal drugs.
- All Women:
  - Determine and discuss an eating pattern appropriate for the participant's weight goal (i.e., maintain, gain or lose weight).
  - Provide education about the dangers of illegal drugs for her own health and her ability to care for her infant.
  - Praise women for any attempt to stop using and acknowledge the difficulty.
  - Refer to the *Substance Use Prevention: Screening, Education, and Referral Resource Guide for Local WIC Agencies*, (<https://wicworks.fns.usda.gov/wicworks/Topics/ResourceManual.pdf>), for more information.

## **POSSIBLE REFERRALS:**

- Refer to a substance use treatment program.
- State law requires mandated reporters (like WIC staff) to report pregnant women who use controlled substances. See Clinic Services Manual, Education, Drug Abuse Education and Referral (04-04-04) for specific policy and procedure.
- If the participant is taking any non-prescribed vitamin or mineral supplements, herbal supplements, or targeted nutrition therapy products, advise discussing these with the primary care provider.
- If she is not receiving prenatal care or routine postpartum care or is not keeping her appointments, refer her to primary care providers in the community, the Optimal Pregnancy Outcome Program (OPOP) ([www.ndhealth.gov/opop](http://www.ndhealth.gov/opop)), or the local public health department.